

**Issue Classification**

-----  
(Assistant Examiner) (Date)  
*James C. [Signature]*  
(Legal Instruments Examiner) (Date)

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47		
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		Final	Original
	1			31			61			121			151			181
	2			32			62			122			152			182
	3			33			63			123			153			183
	4			34			64			124			154			184
	5			35			65			125			155			185
	6			36			66			126			156			186
1	7			37			67			127			157			187
	8			38			68			128			158			188
7	9			39			69			129			159			189
2	10			40			70			130			160			190
3	11			41			71			131			161			191
	12			42			72			132			162			192
8	13			43			73			133			163			193
4	14			44			74			134			164			194
5	15			45			75			135			165			195
6	16			46			76			136			166			196
	17			47			77			137			167			197
	18			48			78			138			168			198
	19			49			79			139			169			199
	20			50			80			140			170			200
	21			51			81			141			171			201
	22			52			82			142			172			202
9	23			53			83			143			173			203
10	24			54			84			144			174			204
	25			55			85			145			175			205
11	26			56			86			146			176			206
12	27			57			87			147			177			207
	28			58			88			148			178			208
	29			59			89			149			179			209
	30			60			90			150			180			210